

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 787750 RECEIPT DATE: 03 / 21 / 01
IA NUMBER: PCT/ SE99 / 01664 IA FILING DATE: 09 / 22 / 99
FAMILY NAME: SKALEN DELAY WAIVED (Y/N): Y
GIVEN NAME: JOHN DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 09 / 22 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: P/1629-43 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

NAME: OSTROLENK/FABER GERB & SOFFEN

STREET: 1180 AVENUE OF THE AMERICAS

CITY: NEW YORK

STATE/COUNTRY: NY ZIP: 100368403

EMAIL:

APPLICATION TITLES:

GOLF TRAINING DEVICE

TAB TO LAST POSITION, PUSH SEND